

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

☒ In re application of: Wilfried Fischer, Hubert Kaffl, Petra Huber,
 Serial No.: Clifton Zimmermann
 09/602,440 Group No.: NYA
 Filed: June 23, 2000 Examiner: NYA
 For: "Patch With Reduced Cold Flow"

☐ Patent No.: Issued:

*NOTE: Insert name(s) of inventor(s) and title also for patent. Where the refund request is with respect to a maintenance fee payment also insert application serial number and filing date and add Box M. Fee to address.

Commissioner of Patents and Trademarks

Washington, D.C. 20231

ATTENTION: REFUND SECTION, ACCOUNTING DIVISION, OFFICE OF FINANCE

REQUEST FOR REFUND

(37 C.F.R. 1.28(a))

I. SUBMISSION OF VERIFIED STATEMENT

(Complete (a) or (b))

- (a) ☒ Attached is a verified statement claiming small entity status in this application.
 (b) ☐ A verified statement claiming small entity status was filed in this application on _____

II. REFUND REQUEST

This request for refund is made within two months of the date a fee was paid in this application on June 23, 2000 in the amount of \$ 690

NOTE: The two-month period (§ 1.28(a)) is not included in the provisions for extension under 37 C.F.R. 1.136 since it is not a period for response. Notice of November 30, 1983, 49 FR 548, January 4, 1984.

CERTIFICATE OF MAILING (37 CFR 1.8(a))

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Commissioner of Patents and Trademarks, Washington, D.C. 20231

Ronald R. Santucci

(Typed or printed name of person mailing paper)

Date: August 23, 2000

Ronald R. Santucci
 (Signature of person mailing paper)

US PATENT & TRADEMARK
 OFFICE

2000 SEP -1 PM 4:47

OFFICE OF FINANCE
 REFUND BRANCH

(Request for Refund [7-9]—page 1 of 2)

III. FEES PAID FOR WHICH REFUND REQUESTED

	AMOUNT OF REFUND REQUESTED
<input checked="" type="checkbox"/> filing fee	345
<input type="checkbox"/> surcharge for filing the basic filing fee on a date later than the filing date of the application (37 CFR 1.16(e))	
and/or	
<input type="checkbox"/> surcharge for filing the oath or declaration on a date later than the filing date of the application (37 CFR 1.16(e))	
<input type="checkbox"/> extension of term	
<input type="checkbox"/> issue fee	
<input type="checkbox"/> patent maintenance fee	
<input type="checkbox"/> first maintenance fee	
<input type="checkbox"/> second maintenance fee	
<input type="checkbox"/> third maintenance fee	
<input type="checkbox"/> patent maintenance fee surcharge.	
<small>NOTE: The refund provisions of § 1.28(a) for later submitted small entity statements apply to maintenance fees. Notice of July 30, 1984, 1046 O.G. 28-37.</small>	
<input type="checkbox"/> other	

TOTAL REFUND REQUESTED

\$345.00

IV. MANNER OF REFUND

Please make refund by

- ☒ crediting Account No. 501145 (Order No. 2727-110)
☐ refunding overpayment


Signature of attorney

Ronald R. Santucci

Type or print name of attorney

Pitney, Hardin, Kipp & Szuch, LLP

P.O. Address

711 Third Avenue, 20th Floor

New York, New York 10017

Reg. No.: 28,988

Tel. No.: (212) 687-6000

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY
STATUS (37 CFR 1.9(f) AND 1.27 (c)) - SMALL BUSINESS CONCERN**

Docket No.
2727-110

Serial No.
09/602,440

Filing Date
06/23/00

Patent No.

Issue Date

Applicant/ Patentee: **Wilfried Fischer, Hubert Kaffl, Petra Huber and Clifton Zimmermann**

Invention: **"Patch With Reduced Cold Flux"**

I hereby declare that I am:

- ☐ the owner of the small business concern identified below:
☒ an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF CONCERN: **Novosis Pharma AG**

ADDRESS OF CONCERN: **Frankfurter Ring 193a, D-80807 Munich, Germany**

I hereby declare that the above-identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the above identified invention described in:

- ☐ the specification filed herewith with title as listed above.
☒ the application identified above.
☐ the patent identified above.

If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed on the next page and no rights to the invention are held by any person, other than the inventor, who could not qualify as an independent inventor under 37 CFR 1.8(c) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- ☒ no such person, concern or organization exists.
☐ each such person, concern or organization is listed below.

FULL NAME _____
 ADDRESS _____

☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

FULL NAME _____
 ADDRESS _____

☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

FULL NAME _____
 ADDRESS _____

☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

FULL NAME _____
 ADDRESS _____

☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING:

Dr. Fischer, Wilfried

TITLE OF PERSON SIGNING

President

OTHER THAN OWNER:

ADDRESS OF PERSON SIGNING:

Frankfurter Ring 193a,
D-80807 Munich
Germany

SIGNATURE:

Fischer

DATE:

Aug. 16th, 2000

Patent and Trademark Office-U.S. DEPARTMENT OF

ATTENTION ATTENTION ATTENTION

0300

Date Processed:

Small

6/23-6/26

O I P E

☐

ACH Payment

Attached Is The Most Current ACH Information

☐

Treasury Check

The Most Current ACH Information Was

Requested From This Customer With The Purpose Of

Processing His Refund Request By Electronic Fund

Transfer (EFT). No EFT Information Was Received.

Therefore, If Customer Is Due A Refund;

A Check Will Be Issued.

Adjustment date: 10/11/2000
07703/2000 SCARNICH 00000027 501145 09602440
01 FC:101 690.00 CR

10/11/2000 AGRAY1 00000009 501145 09602440
01 FC:201 345.00 CH

☒

Credit To Deposit Account

This Request for Refund Will Be Processed By Crediting Deposit

Account Number 501145, If Customer Is Due A Refund.

09/602440

GA

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